

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF		COURT CASE NUMBER <u>C-08-0664-EDL</u>
Rosario Marinello		
DEFENDANT		TYPE OF PROCESS Summons, Complaint & Orders
SERVE		NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>California Department of Corrections & Rehabilitation</u>
AT		Salinas Valley State Prison ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>31625 Highway 101, Soledad, California 93960</u>

FILED

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Rosario Marinello, Pro per
390 Melrose Avenue
Pacific Grove, CA 93960

*E-filing*Number of process to be served with this Form - 285
MAY 27 20084
RICHARD W. WIERING
Number (651) 643-3100 DISTRICT COURT
served NORTHERN DISTRICT OF CALIFORNIACheck for service on U.S.A.
NORTH OF CALIFORNIA18 FEB 9 PM 2:24
RECEIVED
UNITED STATES MARSHALFEB 2008
UNITED STATES MARSHAL

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

Signature of Attorney or other Originator requesting service on behalf of: <u>, Deputy Clerk</u>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (415) 522-2067	DATE 2/28/2008
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>11</u>	District to Serve No. <u>11</u>	Signature of Authorized USMS Deputy or Clerk <u>R. J. D.</u>	Date <u>3/5/08</u>
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service Time am pm
	Signature of U.S. Marshal or Deputy

Service Fee <u>\$16.00</u>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: 3/7/08 - Mailed summons w/ 285 form
3/13/08 - Summons Rec'd Back from Salinas Valley State Prison
3/18/08 - mailed to Filing section for Dept. of Corrections
4-29-08, Acknowledged Receipt of summons



U.S. Department of Justice
United States Marshals Service

NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
 United States District Court
 for the
 Northern District of California

TO: Department of Corrections and Rehabilitation
 Attn: Office of Legal Affairs
 1515 S. Street, Room 314
 Sacramento, CA 95814

Civil Action, File Number C08-0664-EDL

Rosario Marinello

v.

California Dept. of Corrections & Rehabilitation

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 2 to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

3/18/08
Date of Signature

for Federico Roca U.S. Marshal
Signature (USMS Official) R. J. C. Nicker

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

California Dept. of Justice
Attorney General's Office
1515 Clay St 20th Fl; POB 70550
Oakland, CA 94612

Street Number and Street Name or P.O. Box No.

Oakland, CA 94612

City, State and Zip Code

AJF

Signature David Pai, Deputy Attorney General

Copy 1 - Clerk of Court
 Copy 2 - United States Marshals Service
 Copy 3 - Addressee
 Copy 4 - USMS District Suspense

Counsel for Dept. Corr. & Rehab

Relationship to Entity/Authority to Receive

Service of Process

4/29/08

Date of Signature